REDACTED - FOR PUBLIC INSPECTION Rate Floor Data

		- 1	RATE FLOOR	DAT	A COLLI	ECTION - OM	B Control Nur	mber 3060-
Block	l - Cont	act Inforn	nation		22,883,000		20	
ROW#	DATA ELEMENT					FORMAT OF REQUESTED DATA		RESPONS
1	Carrier S	Carrier Study Area Code				6 numeric digits	462208	
2	Carrier Study Area Name					alpha characters	CenturyTel-Colorac	do
3	Service Provider Identification Number					9 numeric digits	143002506	
4	Residential Local Service Charge Effective Date					mm/dd/yyyy	6/1/2015	1115
5	Contact	Name				alpha characters	Kenneth W. Bucha	n
6	Contact	Telephone	Number (include ar	ea code)	9 numeric digits	(318) 362-1538	H155-17-12-12-12-12-12-12-12-12-12-12-12-12-12-
7	Sheet no	umber				numeric digit(s)	1	
8	Total Nu	mber of Sh	eets			numeric digit(s)	1	
******	Column 1 Residential Local State Subscriber Service Charge Line Charge Service Fee				olumn 3	Column 4 Mandatory Extended Area	Column 5 Loops	ie Counts
		e Gliarge	Line Griarge		vice ree	Service Charge		
9	\$	16.00	NA -	\$	0.42	NA	-8	
10	\$	16.00	NA NA	\$	0.42	NA	-	
11	\$	16.00	NA NA	\$	0.42	NA	-8	i
12	\$	16.00	NA	\$	0.42	NA	_	
13	\$	12.37	NA NA	\$	0.32	NA NA		
14	\$	12.37	NA	\$	0.32	NA	71	
15	\$	12.37	NA NA	\$	0.32	NA NA		
16	\$	12.37	NA NA	\$	0.32	· NA	0.000	
17				8				
18			11179					
19		100000				- 4112		-
20								-
21								-
22				2.				-
23								
24								-
25				3				-
26		-						-
27								-
28								-
29								1.

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING RATE FLOOR DATA ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Data												
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data reported; and, to the best of my knowledge, the information reported on this form is accurate.												
Name of Reporting Carrier: CenturyTel of Colorado, Inc. d/b/a CenturyLink												
Signature of authorized officer Date (0/1/1/5												
Printed name of authorized officer David D. Cole												
Title or position of authorized officer												
The St. Person of Annual Man Street Tree Free Free Free Free Free Free Free												
Telephone number of authorized officer: (318) 388-9000, ext.												
Study Area Code of Reporting Carrier	462208		Filing Due Date for this form (mm/dd/yyyy)	7/1/2015								